

BEST AVAILABLE COPY

CLAIMS

SERIAL NO.

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*		*		*	
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49							99						
50							100						
TOTAL IND.							TOTAL IND.						
TOTAL DER.							TOTAL DER.						
TOTAL CLAIMS							TOTAL CLAIMS						

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS